

# ISOLATION/BLIND LIST FOR ROUTINE MAINTENANCE

## APPENDIX A

Click here to obtain the electronic copy of the Isolation List.

Prepared By: \_\_\_\_\_

Field Verified By HO  
or **HO Qualified**  
**Personnel Releasing**  
**Equipment:** \_\_\_\_\_

1. Enter one tag number on each line.
2. Enter date for each section of the blind tags. (E – A)
3. Enter date and initials in section C and A.

4A. Is **480v disconnect** needed? YES NO

4B. Is **480v disconnect** complete? YES NO

Equipment No.:	Business Unit:	Plant:	* <b>Radiation Source Isolated</b> YES NO NA			Date:
	BLIND TAG SECTION					
			Blind In		Blind Out	
			Date / Initial	Date	Date / Initial	
Tag Number	<b>E</b>	<b>D</b>	<b>C</b>	<b>B</b>	<b>A</b>	<div> <div>Location Description</div> <div>Type of Isolation</div> <div>Service</div> <div> <div>Fresh Air</div> <div>Y / N</div> </div> </div>

REVISED: 2/10 (Replaces 5/07) \*RI-9020-Radioactive Materials 9900-A-1  
 Certified as current and accurate: 2/10

## APPENDIX A

REVISED:	2/10	(Replaces	5/07)	*RI-9020-Radioactive	Materials	9900-A-2
Certified as current and accurate: 2/10						

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	BLIND TAG SECTION					Location Description	Type of Isolation	Service	Fresh Air
Tag Number	Date	Date	Blind In		Blind Out				
			Date / Initial		Date / Initial				Y
	E	D	C	B	A				N

RI-9020-Radioactive Material